

If you plan to use (or are already using) sick leave and/or annual leave credits to keep you in full pay status while receiving Workers' Compensation or while you are awaiting determination of your Workers' Disability Compensation claim, you must complete and return this form to your Personnel or Human Resources Office as soon as possible. Failure to return this form promptly may result in a delay in processing any payments or adjustments due. Questions regarding the re-crediting process should be directed to your Personnel or Human Resources office.

As an employee of the State of Michigan, I authorize my department to deposit my Workers' Disability Compensation check in order to re-credit the proper amount of sick and/or annual leave I may have used to keep me in full pay status, and to process any other adjustments that may be necessary; i.e., FICA, tax withheld, etc. I understand that such adjustments will be made in accordance with Civil Service rules and appropriate statutes and that my department will issue a check to me for the remaining balance, if any.

I also understand that after my first check, if I am not being kept in full pay status, Citizens Management, Inc. will send all subsequent Workers' Disability Compensation checks directly to me.

Signature		Date
		/ /
Printed Name (First, Middle Initial, Last)		
Social Security Number	Employing Department	
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**** Employee: The original of this form should be sent to your Personnel or Human Resources Office. Please Keep a copy for your records****